

California Commission on the Status of Women Public Hearings

Testimony Sign-up Form

Please complete this form **ONLY** if you plan on presenting testimony

Priority to **testify** will be given to individuals who submit this form by the dates listed.

Identify **ONE** location below to present testimony.

| | | |
|--|--|--|
| <input type="checkbox"/> <u>September 20, 2006</u> 2 to 6 pm <i>Center for Healthy Communities</i> The California Endowment 1000 N Alameda Street Redwood Room Los Angeles, CA 90012 <i>Submit form by Sept 15th</i> | <input type="checkbox"/> <u>September 28, 2006</u> 1:30 to 5:30 pm <i>Fresno State Building</i> 2550 Mariposa Mall Assembly Room Fresno, CA 93721 <i>Submit form by Sept 25th</i> | <input type="checkbox"/> <u>October 19, 2006</u> 1 to 5 pm <i>State Capitol</i> Room 447 Sacramento, CA 95814 <i>Submit form by Oct 13th</i> |
|--|--|--|

Name: _____
Organization: _____
Address: _____
Phone: _____ Email: _____
Subject: _____
Summary of issue: _____

I/We request that the following be considered as recommendations for the CCSW:

Please rank in order of importance and label as you see them to be legislative (L), administrative (A), study (S), or budget (B) recommendations.

1. _____

2. _____

3. _____

I/We wish to present ☐ oral testimony ☐ written testimony ☐ both

Oral testimony will be limited to no more than 5 minutes

Mail or fax the completed form to California Commission on the Status of Women
1303 J St Ste 400 ♦ Sacramento CA 95814-2900 ♦ 916-445-3173 ♦ 916-322-9466 fax

To **submit** this form **online** go to www.women.ca.gov